



Request for Advance Notification of Pesticide Application by First Class Mail

Dear Parent / Guardian:

Complete this form ONLY if you are requesting advance notification of a pesticide application by United States Postal Service first-class mail.

Please be advised that you WILL receive notice via the methods identified in the annual advisory notice and should only complete this form if you are also requesting notification by first-class mail. If you are requesting prior notification of pesticide treatments conducted at this school, other than a bait or gel formulation, and you would like the notice to be delivered by United States Postal Service first-class mail, postmarked at least 3 days prior to the planned treatment, please complete the information on the following form and return to your child's school main office or main room.

I wish to receive a prior notice of any pesticide application to the school by first-class mail.

Student School: _____

Parent Name: _____

Student Name: _____

Street Address: _____

City, Zip Code: _____

Day Phone #: _____

Evening Phone #: _____

Please Check One:

_____ I wish to be notified prior to a scheduled pesticide application inside of the school building.

_____ I wish to be notified prior to a scheduled pesticide application on the outside grounds of the school building.

_____ Both of the above.

Signature

Date